This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts.

STATE OF ILLINOIS, CIRCUIT COURT COUNTY		ADDITIONAL PROOF OF DELIVERY		Court Use Only			
Instructions ▼ Directly above, enter county where the case is filed.							
Enter the name of the Plaintiff/ Petitioner. Enter the name of the	Plaintiff / Petit	oner (First, middle, last name)					
Enter the Case Number given by the Circuit Clerk.	Defendant / Ro	espondent (First, middle, last name)	Case	Case Number			
In 1a, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.	 I sent this a. To: Nam Addr	First Mi	iddle	Last			
In 1b, check the box to show how you sent the document, and fill in any other information required on the blank lines.	Street, Apt # City State Email address: b. By: Personal hand delivery Regular, First-Class Mail, put into the U.S. Mail with postage paid at: Address of Post Office or Mailbox Third-party commercial carrier, with delivery paid for at: Name (for example, FedEx or UPS) and office address The court's electronic filing manager (EFM) or an approved electronic fil service provider (EFSP) Email (not through an EFM or EFSP)						
CAUTION: If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.							
In c , fill in the date and time that you sent the document.	c. On:	Mail from a prison or jail at: Name of prison or jail Date a.m. p.m.					
In 2, if you sent the document to more than 1 party or lawyer, fill in a, b, and c. Otherwise leave 2 blank.		Time s document:	iddle	Last			
	Addr Ema		City	State ZIP			
	b. By:	☐ Personal hand delivery☐ Regular, First-Class Mail, put in	nto the U.S. Mail with	h postage paid at:			

			Third-party commercial carrier, with delivery paid for at:						
			Name (for example, F	edEx or UPS) and	office address				
				The court's electronic filing manager (EFM) or an approved electronic filing					
			service provider (EF	FSP)					
			Email (not through an EFM or EFSP) Mail from a prison or jail at:						
			Name of prison or jail						
	C.	On:	, ,						
		Da							
		At:		∐ p.m.					
In 3, if you sent the									
document to more than 2 parties or lawyers, fill	3. Is	3. I sent this document:							
in \mathbf{a} , \mathbf{b} , and \mathbf{c} .	a.								
Otherwise leave 3 blank.		Name:	First	Middle		Last			
orank.		Address		madie		2401			
			Street, Apt #		City	State	ZIP		
		Email ad	ddress:						
	b.	Ву:	Personal hand deliv	erv					
	٠.		Regular, First-Class Mail, put into the U.S. Mail with postage paid at:						
			,			0 1			
			Address of Post Office or Mailbox						
			Third-party commercial carrier, with delivery paid for at:						
			Name (for example, F	edEx or UPS) and	office address				
				The court's electronic filing manager (EFM) or an approved electronic filing					
				service provider (EFSP)					
			Email (not through ar	Email (not through an EFM or EFSP)					
			Mail from a prison o	r jail at:					
			Name of prison or jail						
	C.	On:	Name or prison or jair						
	0.		ate						
		At:	a.m.	□ p.m.					
	1	111	me						
Under the Code of		_	erything in the <i>Addi</i>		=		derstand		
Civil Procedure, <u>735</u> <u>ILCS 5/1-109</u> , making			ent on this form is pe	rjury and has pe	nalties provide	d by law under			
a statement on this	<u>735 II</u>	<u>_CS 5/1-1</u>	<u>09</u> .						
form that you know to be false is perjury, a	/0/								
Class 3 Felony.	/s/ Your	Signature		Stree	et Address				
If you are completing		-							
this form on a computer, sign your	Drint 1	Your Name		Cit.	State, ZIP				
name by typing it. If	Print	rour marrie		City,	Sialt, ZIP				
you are completing it by hand, sign and print									
your name.	Telep	hone							

Enter the Case Number given by the Circuit Clerk:_